

Patient fees are subject to annual revision.


OCT 06 2003

INVENT & TRADEMARK OF
TOTAL AMOUNT

TOTAL AMOUNT OF PAYMENT	(\$)	1005
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Application Number	09/714,997
Filing Date	November 20, 2000
First Named Inventor	Robert ROSS et al.
Examiner Name	George C. Neuraute
Group / Art Unit	2143
Attorney Docket No.	36956-168147

METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:					3. ADDITIONAL FEES					
Deposit Account Number	22-0261				Fee Code	Lrg Ent Fee (\$)	Fee Code	Sm Ent Fee (\$)	Fee Description	Fee Paid
Deposit Account Name	Venable LLP				1111	500	2111	250	Utility Search Fee	
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					1112	100	2112	50	Design Search Fee	
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other					1113	300	2113	150	Plant Search Fee	
FEE CALCULATION					1114	500	2114	250	Reissue Search Fee	
1. BASIC FILING FEE					1311	200	2311	100	Utility Examination Fee	
Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description						
1011	300	2011	150	Utility filing fee						
1012	200	2012	100	Design filing fee						
1013	200	2013	100	Plant filing fee						
1014	300	2014	150	Reissue filing fee						
1005	200	2005	100	Provisional filing fee						
1081	250	2081	125	Utility App. Size Fee						
1082	250	2082	125	Design App Size Fee						
1083	250	2083	125	Plant App. Size Fee						
1084	250	2084	125	Reissue App Size Fee						
1085	250	2085	125	Prov. App Size Fee						
SUBTOTAL (1)										
2. EXTRA CLAIM FEES					1312	130	2312	65	Design Examination Fee	
Total Claims	20	-20 **	=	Extra Claims	X	Fee from below	=	Fee Paid		
Independent Claims	4	-3**	=	1	X	100	=	100		
Multiple Dependent					X		=			
Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description						
1202	50	2202	25	Claims in excess of 20						
1201	200	2201	100	Independent claims in excess of 3						
1203	360	2204	180	Multiple dependent claim, if not paid						
1204	200	2204	100	** Reissue independent claims in excess of three						
1205	50	2205	25	** Reissue claims in excess of 20 and over original patent						
SUBTOTAL (2)										
					1314	600	2314	300	Reissue Examination Fee	
					1051	130	2051	65	Surcharge - late filing fee or oath	
					1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet.	
					1053	130	1053	130	Non-English specification	
					1812	2,520	1812	2,520	For filing a request for reexamination	
					1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
					1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
					1251	120	2215	60	Extension for reply within first month	
					1252	450	2252	225	Extension for reply within second month	
					1253	1,020	2253	510	Extension for reply within third month	\$510
					1254	1,590	2254	795	Extension for reply within fourth month	
					1255	2,160	2255	1080	Extension for reply within fifth month	

SUBMITTED BY Complete (if applicable)					
Name (Print/Type)	Ralph P. Albrecht	Reg No. Attorney/Agent	43,466	Telephone	202-344-8166
Signature		Date	10/6/05		